24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E) PAGE 1 OF 1 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼	
Our Children's Future	C C00577296
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee Kelly Kullberg	Date of Public Distribution/Dissemination
, ,	01 01 2016
Mailing Address 2615 Henthorn Rd	Amount
City State Zip Code	625.00
Columbus OH 43221	Transaction ID : SE.4308 Date of Disbursement or Obligation
Purpose of Expenditure Social Media Services Category, Type	M M / D D / Y Y Y Y
Name of Federal Candidate	Support Office Sought: House District:
BENJAMIN S SR MD CARSON	Oppose President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 625.00	Disbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Wilson Grand Communications	02 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 429 N St. Asaph St	Amount
City State Zip Code	20000.00
Alexandria VA 22314	Transaction ID : SE.4305 Date of Disbursement or Obligation
Purpose of Expenditure Radio Advertising Category. Type	M M / D D / Y Y Y Y Y
Name of Federal Candidate	Support Office Sought: House District:
BENJAMIN S SR MD CARSON	Oppose President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 20625.	Disbursement For:
	Cutter (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	20625.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	20625.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Rebekah Curran [Electronically Filed]	Date 02 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	